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**DECLARATION (37 CFR 1.63) FOR UTILITY OR DESIGN APPLICATION USING AN  
APPLICATION DATA SHEET (37 CFR 1.76)**

**Title of Invention** CATHETERIZATION ASSIST DEVICE AND METHOD OF USE

As the below named inventor(s), I/we declare that:

This declaration is directed to:

- ☒ The attached application, or  
☐ Application No. \_\_\_\_\_, filed on \_\_\_\_\_,  
☐ as amended on \_\_\_\_\_ (if applicable);

I/we believe that I/we am/are the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought;


I/ we have reviewed and understand the contents of the above-identified application, including the claims, as amended by any amendment specifically referred to above;

I/we acknowledge the duty to disclose to the United States Patent and Trademark Office all information known to me/us to be material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT International filing date of the continuation-in-part application.

All statements made herein of my/own knowledge are true, all statements made herein on information and belief are believed to be true, and further that these statements were made with the knowledge that willful false statements and the like are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001, and may jeopardize the validity of the application or any patent issuing thereon.

**FULL NAME OF INVENTOR(S)**

Inventor one: Dennis M. Laherty

Signature: 

Citizen of: USA

Inventor two: Nancy A. Laherty

Signature: \_\_\_\_\_

Citizen of: USA

Inventor three: \_\_\_\_\_

Signature: \_\_\_\_\_

Citizen of: \_\_\_\_\_

Inventor four: \_\_\_\_\_

Signature: \_\_\_\_\_

Citizen of: \_\_\_\_\_

☐ Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

Burden Hour Statement: This collection of information is required by 35 U.S.C. 115 and 37 CFR 1.63. The information is used by the public to file (and the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This form is estimated to take 1 minute to complete. This time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

# IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

## POWER OF ATTORNEY

Docket No.

**LAH003**

Name of Applicant: **Dennis M. Laherty**  
Address of Applicant: **12281 Lesley Street**  
**Garden Grove, CA 92840**

Title: **CATHETERIZATION ASSIST DEVICE AND METHOD OF USE**

Serial No., if Any:

Filed:

TO THE COMMISSIONER FOR PATENTS

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Honorable Sir:

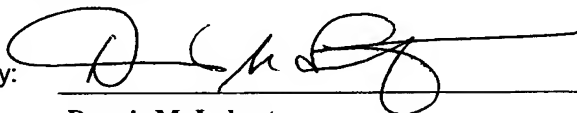
I hereby appoint:

**Eric J. Groen, Reg. No. 32,230**  
**Gerard T. Gallagher, Reg. No. 39,679**  
**Daniel Tychonievich, Reg. No. 41,358**  
**Kevin R. Erdman, Reg. No. 33,687**  
**John F. Hoffman, Reg. No. 26,280**  
**Thomas A. Ladd, Reg. No. 32,543**  
**Anthony Niewyk, Reg. No. 24,871**  
**Nancy G. Tinsley, Reg. No. 37,098**

as principal attorneys to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith.

Please direct all future correspondence to:

**Daniel Tychonievich, Reg. No. 41,358**  
**Baker & Daniels**  
**205 W. Jefferson Blvd., Suite 250**  
**South Bend, IN 46601**  
**Tel.: (574) 234-4149**

By:   
**Dennis M. Laherty**

Dated: 1-10-04

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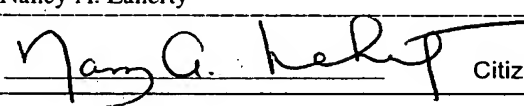
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<b>FULL NAME OF INVENTOR(S)</b>	
Inventor one:	Dennis M. Laherty
Signature:	Citizen of: USA
Inventor two:	Nancy A. Laherty
Signature: 	Citizen of: USA
Inventor three:	
Signature:	Citizen of:
Inventor four:	
Signature:	Citizen of:

☐ Additional inventors are being named on \_\_\_\_\_ additional form(s) attached hereto.

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